



County of Kings - Department of Public Health
Environmental Health Services Division
330 Campus Drive Hanford, CA 93230
Phone - 559-584-1411 Fax - 559-584-6040
Internet - www.countyofkings.com/ehs

FOOD SAFETY EVALUATION REPORT

FACILITY NAME: SPIRITS LOUNGE	BUSINESS PHONE: (559) 381-0016	RECORD ID#: PR0000490	DATE: December 06, 2022
FACILITY SITE ADDRESS: 390 S 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: HENRY VAN HEERINGEN	CERTIFIED FOOD MANAGER: EVALIN A HERLEMAN	EXP DATE: 11/4/2013	INSPECTOR: Troy Hommerding-REHS

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation.
One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

Violation: None Noted

General Comments:

Three compartment bar sink and three compartment back room sink, both were observed with hot and cold running water.
Both restrooms were fully stocked.
Bar area was noted in satisfactory condition.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Troy Hommerding-REHS

Received By:

Agency Representative

NOTE: This report must be made available to the public on request



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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: SEQUOIA CLUB	BUSINESS PHONE: (559) 707-1411	RECORD ID#: PR0000197	DATE: December 06, 2022
FACILITY SITE ADDRESS: 118 N IRWIN ST	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: ROBERT LEE	CERTIFIED FOOD MANAGER: Not Specified	EXP DATE:	INSPECTOR: Troy Hommerding-REHS

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation.
One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

Violation: None Noted

General Comments:

Bar area is in satisfactory condition.
Bar three compartment sink was observed with hot & cold running water.
Restrooms were in satisfactory condition and fully stocked.

RESULTS OF EVALUATION: <input checked="" type="checkbox"/> PASS <input type="checkbox"/> NEEDS IMPROVEMENT <input type="checkbox"/> FAIL	Reinspection Required: Yes: <input type="checkbox"/> No: <input checked="" type="checkbox"/> Reinspection Date (on or after): <u> N/A </u> <input type="checkbox"/> Potential Food Safety All Star:
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Received By:

Troy Hommerding-REHS

Agency Representative

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FOOD SAFETY EVALUATION REPORT

FACILITY NAME: SPIRITS LOUNGE	BUSINESS PHONE: (559) 582-7747	RECORD ID#: PR0000490	DATE: March 10, 2020
FACILITY SITE ADDRESS: 390 S 11TH AVE	CITY: HANFORD	ZIP CODE: 93230	INSPECTION TYPE: ROUTINE INSPECTION
OWNER NAME: HENRY VAN HEERINGEN	CERTIFIED FOOD MANAGER: EVALIN A HERLEMAN	EXP DATE: 11/4/2013	INSPECTOR: Luis Flores - REHS

The items (if any) listed below identify the violation(s) that must be corrected. Thank you for your cooperation.
One reinspection will be conducted (if needed) at no charge. A service fee is assessed for each additional reinspection required.

Violation: None Noted

General Comments:

The bar area, both restrooms, and the back storage room were all observed in very good operational condition.

No facility deficiencies were observed. Thank you for maintaining a good establishment.

RESULTS OF EVALUATION: PASS NEEDS IMPROVEMENT FAIL

Reinspection Required: Yes: No:

Reinspection Date (on or after): N/A

Potential Food Safety All Star:

Luis Flores - REHS

Received By:

Agency Representative

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